

Mental Health Dosage Capture and Reporting

Harris County Juvenile Probation Department (HCJPD)
Juvenile Information Management System (JIMS2)

JIMS2 system was developed with dual access

- Probation/casework & Service Providers/outside vendors
 - Create calendar sessions
 - Add youth into calendared sessions
 - Create program referral
 - Accept youth into program
 - Print and use sign-in sheets
 - Monitor and communicate regarding youth's involvement with vendor
 - Monitor and communicate regarding youth's involvement with HCJPD
 - Turn in completed sign-in sheets
 - Mark attendance in a timely manner
 - Close program referral with appropriate outcome

Creating Vendor Accounts


HCJPD Technology Training Personnel:

- Set up account per contractual agreement – JIMS2 tracks all pertinent information regarding the account, programs, and sessions
- Train outside vendors for access and modify accounts to individualize their services where needed

Service Provider - Program Details					
Provider Name	FIELD THERAPY - MENTAL HEALTH SERVICES				
Start Date	09/25/2013	In House	NO		
[-] FIELD THERAPY ASSESSMENT - CUPS 1					
Name	FIELD THERAPY ASSESSMENT - CUPS 1		Code	MCA	
Target Intervention	BEHAVIOR HEALTH TJJD EDI				
State Program Code	MENTAL HEALTH				
Program Start Date	09/25/2013	Program End Date			
Create Program	CALENDAR TAB AND PROGRAM REFERRAL TAB				
Program Location	COMMUNITY				
Category	TREATMENT				
Source Fund	MENTAL HEALTH SERVICES				
Fund Start Date	09/01/2015	Fund End Date			
Description	ALLOWS OFFICERS TO REFER YOUTH FOR INTERNAL MHMRA COUNSELING.				
Program Source Fund History					
Entry Date	Source Fund	Fund Start Date	Fund End Date	Status	
01/11/2017	MENTAL HEALTH SERVICES	09/01/2015		ACTIVE	
01/11/2017	MENTAL HEALTH GRANT	10/17/2013	08/31/2015	INACTIVE	
10/19/2016	LOCAL FUNDS	09/25/2013	10/16/2013	INACTIVE	
Services					
<input type="radio"/>	Name	Code	Type	Location Unit(s)	Status
<input type="radio"/>	FIELD THERAPY ASSESSMENT	FIELDTHERA	(SP) COUNSELING	CUPS 1	ACTIVE

Vendor Calendaring Responsibilities

Once trained, the vendor representative uses JIMS2 to create their calendars/sessions

Service Type			
◆ Service Location Unit		CUPS 1 ▼	
◆ Service Type		(SP) COUNSELING ▼	
◆ Service Provider		Service Name	
[-] CENTER FOR SUCCESS AND INDEPENDENCE - TCSI			
Service Event Scheduling			
◆ Event Date		08/12/2017	◆ Event Time
◆ Session Length		1.5 HOURS ▼	◆ Max Attendance
◆ Instructor Name		STAFF, TSD ADMIN ▼	15
Comments  (Max. characters allowed: 255)			
Comments to indicate session goals and/or services provided			
◆ Recurring Event? <input checked="" type="radio"/> Yes <input type="radio"/> No			
◆ Recurrence Pattern			
Daily ▼			
<input type="radio"/> Every <input type="text"/> day(s).			
<input checked="" type="radio"/> Every weekday			
◆ Range of Recurrence			
<input checked="" type="radio"/> End after <input type="text"/> 10 occurrences <input type="radio"/> End by <input type="text"/>			

Officer Calendaring Responsibilities:

The officer can put youth into appropriate sessions through JIMS2 casework side.

Casefile	Rules	Caseplan	Referrals	Program Referral	Traits	Calendar	Common App
Service Provider							
CENTER FOR SUCCESS AND INDEPENDENCE - TCSI							
Program: TCSI - RECREATIONAL ALTERNATIVE (RAP) PROGRAM ✕							
Service Name: TCSI - RAP SESSION - WEEK 1 SESSION 1							
<input type="checkbox"/> Event Date ▲ ▼	Event Time	Event Type	Location Unit ▲ ▼	Instructor ▲ ▼	Event Max	Sched	
<input type="checkbox"/> 08/14/2017	09:00 AM	(SP) COUNSELING	CUPS 1	STAFF, TSD ADMIN	15	0	
<input type="checkbox"/> 08/15/2017	09:00 AM	(SP) COUNSELING	CUPS 1	STAFF, TSD ADMIN	15	0	
<input type="checkbox"/> 08/16/2017	09:00 AM	(SP) COUNSELING	CUPS 1	STAFF, TSD ADMIN	15	0	
<input type="checkbox"/> 08/17/2017	09:00 AM	(SP) COUNSELING	CUPS 1	STAFF, TSD ADMIN	15	0	
<input type="checkbox"/> 08/18/2017	09:00 AM	(SP) COUNSELING	CUPS 1	STAFF, TSD ADMIN	15	0	
<input type="checkbox"/> 08/21/2017	09:00 AM	(SP) COUNSELING	CUPS 1	STAFF, TSD ADMIN	15	0	
<input type="checkbox"/> 08/22/2017	09:00 AM	(SP) COUNSELING	CUPS 1	STAFF, TSD ADMIN	15	0	
<input type="checkbox"/> 08/23/2017	09:00 AM	(SP) COUNSELING	CUPS 1	STAFF, TSD ADMIN	15	0	
<input type="checkbox"/> 08/24/2017	09:00 AM	(SP) COUNSELING	CUPS 1	STAFF, TSD ADMIN	15	0	
<input type="checkbox"/> 08/25/2017	09:00 AM	(SP) COUNSELING	CUPS 1	STAFF, TSD ADMIN	15	0	

Officer Creates Program Referral

After calendar dates are selected, the system will prompt for a program referral creation if one does not already exist. JPO will enter comments meant to communicate needs to the vendor.

Casefile	Rules	Caseplan	Referrals	Program Referral	Traits	Calendar	Common App
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 Juvenile Past Attendance for Program

Program Referral Details - Program: TCSI - RECREATIONAL ALTERNATIVE (RAP) PROGRAM

Begin Date	08/14/2017	◆Assigned Hours	<input type="text"/>
◆Court Ordered	<input type="radio"/> Yes <input type="radio"/> No	Referral Status	ACCEPTED
Comments	<div>ABC ✓ (Max. characters allowed: 1000)</div> <div></div>		

Vendor Receives the Tentative Program Referral

Vendor accepts the program referral to begin work with the youth

Program Referral - DUMMY_JONES, JAMES

+ Event Details

+ Juvenile Past Attendance for Program

+ Juvenile Program Referral History

Program Referral Details - [Notify Caseload Manager](#)

Begin Date	08/14/2017	End Date	
Assigned Hours	15	Court Ordered	Yes
Referral Status	TENTATIVE - REFERRED	Sent Date	08/18/2017
Outcome		Acknowledgment Date	

Comments

[08/18/2017 16:23 - GLOVER, CARLA] This is where the comments regarding youth needs would be entered

Session Attendance

After the session date, the vendor is responsible to mark attendance and turn in system generated sign-in sheets to designated HCJPD personnel.

Event Date	08/14/2017	Event Location	INTAKE
Event Time	02:00 PM	Session Length	30 minutes
Event Type	(SP) PROGRAM	Event Status	AVAILABLE
Minimum Attendance	1	Maximum Attendance	12
Total Scheduled	1	Instructor Name	STAFF, TSD ADMINISTRATION
Comments			

Juvenile Attendance List

Attended	Absent	Excused	Juvenile Name	Juvenile #	Additional Attendees	Progress Notes	Add Attendees' Name
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	DUMMY_JONES, JAMES	393676	<input type="text"/>	Add	Add

Attendance Sign-in Sheet

Attendance must be documented in Project2 within 7 days of event.

Date/Time: Aug 15, 2018 07:30 AM

TEST SERVICE PROVIDER - PRODUCTION, the following juveniles are scheduled for this event:

Program Name: TEST SP PROGRAM

Service Name: TEST SP SESSION

Event Type: (SP) PROGRAM

Session Length: 01:00 hours

Total Scheduled: 3


Location Unit: DETENTION CENTER

Instructor Name: STAFF, ADMIN

<u>Name</u>	<u>Juvenile Number</u>	<u>Signature</u>
<u>DUMMY.TEST2</u>	<u>380241</u>	_____
JPO: CARLA GLOVER		
<u>DUMMY4.TEST TSD</u>	<u>384611</u>	_____
JPO: CARLA GLOVER		
<u>HILTON.PARIS TEST</u>	<u>337098</u>	_____
JPO: CARLA GLOVER		
_____	_____	_____
_____	_____	_____

Program Closure

After youth involvement with the vendor is complete, it is the officer's responsibility to close program.

+ Juvenile Past Attendance for Program			
Program Referral Details - Program: TCSI - RECREATIONAL ALTERNATIVE (RAP) PROGRAM			
Begin Date	08/14/2017	◆ End Date	08/18/2017
Assigned Hours	15	Court Ordered	No
Referral Status	ACCEPTED	Sent Date	08/18/2017
◆ Outcome	COMPLETED	Acknowledgment Date	
Outcome Description	JUVENILE STATISFIED ALL REQUIREMENTS		
Current Comments			
youth is in need of services [08/18/2017 15:55 - GLOVER, CARLA]			
Comments  (Max. characters allowed: 1000)			
<div></div>			

Data Analysis -Program Referrals

JIMS2 captures all data related to program referrals.

Programname	Program Referral Outcomes										Total
	Still active	Absent without Permission	Cancelled	Supervision Ended	Transferred Jurisdiction	Rejected	Completed	Unsuitable	Withdrawn	Failure to Comply	
HCLA - FACILITY MENTAL HEALTH FAMILY COUNSELING	18	0	1	10	0	0	140	0	0	1	170
HCLA - FACILITY MENTAL HEALTH GROUP COUNSELING	70	0	0	24	0	0	232	0	0	4	330
HCLA - FACILITY MENTAL HEALTH INDIVIDUAL ASSESSMENT	3	0	2	2	0	17	267	0	0	4	295
HCLA - FACILITY MENTAL HEALTH INDIVIDUAL COUNSELING	66	2	2	40	0	5	347	0	0	10	472
HCLA - FACILITY MENTAL HEALTH MD ASSESSMENT	8	0	0	0	0	0	175	0	0	0	183
HCLA - FACILITY MENTAL HEALTH MD FOLLOW UP	27	0	0	17	0	0	199	0	0	5	248

Data Analysis – Hours for Providers

Since JIMS2 allows for length of session, the instructor, and the attendance information capture, the attended hours can be calculated. Date capture of the session and the funding source allow further information analysis and reporting.

<u>Staff1</u>			<u>Staff2</u>		
Session length in hours	Amount	Total time in hours	Session length in hours	Amount	Total time in hours
0.5	15.0	7.50	0.5	0.0	0.00
1.0	50.0	50.00	1.0	32.0	32.00
1.5	0.0	0.00	1.5	8.0	12.00
2.0	5.0	10.00	2.0	5.0	10.00
TOTAL TIME		57.50	TOTAL TIME		54.00

Data Analysis – Session Attendance

Location								
Assessments	Total	Absent	Excused	Attended		Absent	Excused	Attended
CUPS 1	5	0.0%	0.0%	100.0%		0	0	5
CUPS 2	25	56.0%	0.0%	24.0%		14	0	6
CUPS 3	13	7.7%	15.4%	76.9%		1	2	10
CUPS 4	8	0.0%	37.5%	62.5%		0	3	5
CUPS 8	12	8.3%	25.0%	66.7%		1	3	8

Instructor								
Assessments	Total	Absent	Excused	Attended		Absent	Excused	Attended
Staff1	17	17.6%	11.8%	70.6%		3	2	12
Staff2	11	9.1%	36.4%	54.5%		1	4	6
Staff3	6	83.3%	0.0%	16.7%		5	0	1
Staff4	14	0.0%	14.3%	85.7%		0	2	12
Staff5	15	46.7%	0.0%	20.0%		7	0	3

Data Analysis – Youth Attendance

Vendors bill HCJPD by date of service. Budget checks invoices against the reports generated by the research division to verify billing.

On Belay CUPS 3 July 2017

27JUL2017

juvnum	name	attendstat	servname	addlattend	attendname
	,JORDAN	AT	PROBLEM SOLVING DECISION MAKING	1	CHERYL
	,AGAR	AB	PROBLEM SOLVING DECISION MAKING	0	,
	,TRINITY	AB	ON BELAY CHARACTER BUILDING AND COMMUNITY SERVICE	0	,

Data Analysis – Youth Dosage

HCJPD research can answer questions about how much therapy a youth or group of youth received. This type of information can be used further to analyze outcomes.

Youth Name or Number	Number of attend hours	Attended Sessions	Sessions Scheduled	Percent Attended
Youth 1	29.0	14	45	31.1%
Youth 2	18.5	14	15	93.3%
Youth 3	352.0	266	370	71.9%
Youth 4	30.0	16	16	100.0%
Youth 5	26.0	13	14	92.9%
Youth 6	21.5	13	26	50.0%
Youth 7	68.0	35	47	74.5%
Youth 8	280.5	147	165	89.1%
Youth 9	159.5	86	113	76.1%
Youth10	96.5	84	105	80.0%
Youth11	27.5	15	22	68.2%
Youth12	11.5	10	10	100.0%
Average	93.4			75.2%

Future Goals for System Development

- Addition of pre- and post-program questions to the program referral process
- System generated reports for HCJPD users or vendors
- Using PACT Risk and Needs levels to determine if youth with higher risk/needs get needed services.

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